

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF WISCONSIN

Case number (if known)

Chapter you are filing under:

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Brian

First name

Edward

Middle name

Christman

Last name and Suffix (Sr., Jr., II, III)

Eva

First name

Middle name

Christman

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

Eva Christman Ibarra

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-0553

xxx-xx-6124

Debtor 1 **Brian Edward Christman**
Debtor 2 **Eva Christman**

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

**4. Your Employer
Identification Number
(EIN), if any.**

EIN

EIN

5. Where you live

**3713 Lindermann Avenue
Racine, WI 53405**

Number, Street, City, State & ZIP Code

Racine

County

**If your mailing address is different from the one
above, fill it in here.** Note that the court will send any
notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it
in here.** Note that the court will send any notices to this
mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**6. Why you are choosing
this district to file for
bankruptcy**

Check one:

☒ Over the last 180 days before filing this petition,
I have lived in this district longer than in any
other district.

☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I
have lived in this district longer than in any other
district.

☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
☐ Yes.
- | | | | | | |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
☐ Yes.
- | | | | |
|-----------------------|-------|---------------------|-------|
| Debtor | _____ | Relationship to you | _____ |
| District | _____ | When | _____ |
| Case number, if known | _____ | | |
| Debtor | _____ | Relationship to you | _____ |
| District | _____ | When | _____ |
| Case number, if known | _____ | | |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor* or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

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- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

| | |
|--|--|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17. |
| | 16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17. |
| | 16c. State the type of debts you owe that are not consumer debts or business debts _____ _____ |

| | |
|--|--|
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | <input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. <input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|--|--|

| | | | |
|---|--|--|---|
| 18. How many Creditors do you estimate that you owe? | <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000 |
|---|--|--|---|

| | | | |
|--|---|--|--|
| 19. How much do you estimate your assets to be worth? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
|--|---|--|--|

| | | | |
|---|---|--|--|
| 20. How much do you estimate your liabilities to be? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
|---|---|--|--|

Part 7: Sign Below

| | | |
|----------------|---|---|
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. <u>/s/ Brian Edward Christman</u> Brian Edward Christman Signature of Debtor 1 Executed on <u>May 2, 2023</u> MM / DD / YYYY | <u>/s/ Eva Christman</u> Eva Christman Signature of Debtor 2 Executed on <u>May 2, 2023</u> MM / DD / YYYY |
|----------------|---|---|

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ ABRAHAM MICHELSON

Signature of Attorney for Debtor

May 2, 2023

MM / DD / YYYY

ABRAHAM MICHELSON

Printed name

MICHELSON LAW OFFICE

Firm name

P.O. BOX 67
617 - 6TH STREET
RACINE, WI 53401-0067

Number, Street, City, State & ZIP Code

262-638-8400

Contact phone

amichelson@michelsonlawracine.com

Email address

1054794 WI

Bar number & State

Official Form 101

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1. Pennymac Loan Services
Attn: Bankruptcy
PO Box 514387
Los Angeles, CA 90051-4387

2. Capital One Bank
140 E. Shore Drive 12017-0380
Glen Allen, VA 23059

3. Brookfield Anesthesiologists SC
225 S Executive Drive
Brookfield, WI 53005

4. Discover Bank
6500 New Albany Road
New Albany, OH 43054

Aurora Health Care
Attn. Collections
P.O.Box 343910
Milwaukee, WI 53234

Aurora Health Care
P.O Box 0909996
Milwaukee, WI 53209-0996

Aurora Health Care Southern Lakes
Attn. Collections
P.O.Box 343910
Milwaukee, WI 53234

Aurora Medical Group
Attn: Collections
P.O. Box 343910
Milwaukee, WI 53234

Capital One
Attn: Bankruptcy
P.O. Box 30285
Salt Lake City, UT 84130

Carmax Business Services
P.O. Box 440609
Kennesaw, GA 30160-9511

ChexSystems
Attn: Consumer Relations
7805 Hudson Road, Ste. 100
Woodbury, MN 55125-1595

Citibank NA
Attn: Bankruptcy
5800 South Corporate Place
Sioux Falls, SD 57108

Comenity Bank
P.O. Box 182120
Columbus, OH 43218

Comenity Bank/Boston Store
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity Bank/Kay Jewelers
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity Bank/Victoria Secret
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity/Big Lots
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Comenitycapital/levisa
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Discover Financial
Attn: Bankruptcy
Po Box 3025
New Albany, OH 43054

Dobberstein Law Firm, LLC
PO Box 470
Brookfield, WI 53008-0470

Early Warning Services
16552 North 90th Street #100
Scottsdale, AZ 85260

Educators Credit Union
Attn: Bankruptcy
Po Box 081040
Racine, WI 53408

Equifax Information Services LLC
P.O. Box 740256
Atlanta, GA 30374-0256

Experian
Attn: Bankruptcy
955 American Lane
Schaumburg, IL 60173-4983

Internal Revenue Service
Centralized Insolvency Operations
P.O. Box 7346
Philadelphia, PA 19101-7346

Kohls/Capital One
Attn: Credit Administrator
Po Box 3043
Milwaukee, WI 53201

Kohn Law Firm S.C.
735 N. Water St., Suite 1300
Milwaukee, WI 53202-4106

LJ Ross & Associates
Attn: Bankruptcy
4 Universal Way, Po Box 6099
Jackson, MI 49204

LJ Ross & Associates
Attn: Bankruptcy
4 Universal Way
PO Box 6099
Jackson, MI 49204

LJ Ross and Associates
PO Box 6099
Jackson, MI 49204-6099

LVNV Funding
Attn: Bankruptcy
P.O. Box 10497
Greenville, SC 29603

Milwaukee Radiologists, LTD
Attn: Bankruptcy
39856 Treasury Center
Chicago, IL 60694-9800

Monterey Financial Service
Attn: Bankruptcy
4095 Avenida De La Plata
Oceanside, CA 92056

Motor Credit
2823 Lathrop Ave
Racine, WI 53405

OAC
Attn: Bankruptcy
PO Box 500
Baraboo, WI 53913-0500

OAC Collection Specialists
Attn: Bankruptcy
Po Box 500
Baraboo, WI 53913

Oliver Adjustment Co. of Kenosha/Racine
3416 Roosevelt Road
Kenosha, WI 53142-3937

OneMain Financial Group, LLC
P.O. Box 278
Wilmington, OH 45177-0278

Portfolio Recovery Associates, LLC
Attn: Bankruptcy
120 Corporate Boulevard
Norfolk, VA 23502

Professional Placement Services, LLC
Attn: Bankruptcy
Po Box 612
Milwaukee, WI 53201

Professional Placement Services, LLC
Attn: Bankruptcy
P.O. Box 612
Milwaukee, WI 53201-0612

Professional Placement Services, LLC
272 N, 12th St.
Milwaukee, WI 53233

Resurgent Capital Services
Attn: Bankruptcy
Po Box 10497
Greenville, SC 29603

Social Security Administration
Office of Regional Commissioner
26 Federal Plaza Rm 40-120
New York, NY 10278

Synchrony Bank
Attn: Bankruptcy Dept.
P.O. Box 965060
Orlando, FL 32896-5060

Synchrony Bank/ Old Navy
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Synchrony Bank/QVC
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Synchrony Bank/Sams
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32596

Synchrony Bank/Walmart
Attn: Bankruptcy Dept.
P.O. Box 965060
Orlando, FL 32896-5060

Synchrony/Ashley Furniture Homestore
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Synchrony/PayPal Credit
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Target Nb
C/O Financial & Retail Services
Mailstop BT PO Box 9475
Minneapolis, MN 55440

TD Bank, N.A
1701 Route 70
Cherry Hill, NJ 08003

TeleCheck, Inc.
Attn: Bankruptcy Department
P.O. Box 4451
Houston, TX 77210-4451

The Michelson Law Office
617 Sixth St.
P.O. Box 67
Racine, WI 53401-0067

Trans Union Corporation
P.O. Box 2000
Crum Lynne, PA 19022-2002

Walmart Credit Services/Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

Wells Fargo Dealer Services
Attn: Bankruptcy
1100 Corporate Center Drive
Raleigh, NC 27607

Wisconsin Dept. of Revenue
Special Procedures Unit
P.O. Box 8901
Madison, WI 53708-8901